

In the Claims

Claim 1 (Original): A method of inhibiting a respiratory syncytial virus (RSV) infection in a patient by decreasing the endogenous protein kinase C (PKC) activity within the patient.

Claim 2 (Original): The method of claim 1, wherein the PKC activity is that of at least one classical PKC isoform.

Claim 3 (Original): The method of claim 1, wherein said decreasing comprises administering at least one PKC inhibitor to the patient.

Claim 4 (Original): The method of claim 3, wherein the at least one PKC inhibitor is selected from the group consisting of AG 490, PD98059, PKC-alpha/beta pseudosubstrate peptide, staurosporine Ro-31-7549, Ro-31-8220, Ro-31-8425, Ro-32-0432, sangivamycin; calphostin C, safingol, D-erythro-sphingosine, chelerythrine chloride, melittin; dequalinium chloride, Go6976, Go6983, Go7874, polymyxin B sulfate; cardiotoxin, ellagic acid, HBDDE, 1-O-Hexadecyl-2-O-methyl-rac-glycerol, hypercin, K-252, NGIC-J, phloretin, piceatannol, tamoxifen citrate, flavopiridol, and bryostatin 1.

Claim 5 (Original): The method of claim 3, wherein the at least one PKC inhibitor is selected from the group consisting of an antisense oligonucleotide molecule, a polypeptide, and a function-blocking antibody or fragment thereof.

Claim 6 (Original): The method of claim 3, wherein said decreasing comprises administering a polynucleotide encoding the at least one PKC inhibitor to the patient, wherein the polynucleotide is expressed within the patient.

Claim 7 (Original): The method of claim 1, wherein the patient is human.

Claim 8 (Original): The method of claim 1, wherein the patient is suffering from the RSV infection, and wherein said decreasing alleviates at least one of the symptoms associated with the RSV infection.

Claim 9 (Original): The method of claim 1, wherein the patient is not suffering from the RSV infection.

Claim 10 (Original): The method of claim 3, wherein the at least one PKC inhibitor is administered to the patient orally or intranasally.

Claim 11 (Original): The method of claim 3, wherein the at least one PKC inhibitor is administered with a pharmaceutically acceptable carrier.

Claim 12 (Original): The method of claim 6, wherein the polynucleotide is administered to the patient with a pharmaceutically acceptable carrier, wherein the pharmaceutically acceptable carrier comprises chitosan or a derivative thereof.

Claim 13 (Original): The method of claim 3, wherein the at least one PKC inhibitor is co-administered with at least one additional anti-viral agent.

Claims 14-20 (Cancelled)

Claim 21 (Previously presented): The method of claim 3, wherein the at least one PKC inhibitor comprises interfering RNA, which interferes with PKC expression within the patient.

Claim 22 (Previously presented): The method of claim 21, wherein the interfering RNA comprises siRNA.

Claim 23 (New): The method of claim 21, wherein the PKC expression comprises classical PKC expression.

Claim 24 (New): The method of claim 21, wherein the PKC expression comprises PKC alpha expression.

Claim 25 (New): The method of claim 21, wherein the interfering RNA is administered by the pulmonary route.

Claim 26 (New): The method of claim 21, wherein the interfering RNA is administered to the patient's bronchial epithelium.

Claim 27 (New): The method of claim 21, wherein the interfering RNA is administered intranasally to the patient's mucosa.